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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Marcqueisha First name T. Middle name White Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	FKA Marcqueisha T. Cowan	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-8136	

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Case number (if known)

Debtor 1 Marcqueisha T. White

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and		■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)		
	doing business as names	EINs	EINs		
5 .	Where you live		If Debtor 2 lives at a different address:		
,		3728 Cherry Hills Dr. Flossmoor, IL 60422 Number, Street, City, State & ZIP Code Cook County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known) Debtor 1 Marcqueisha T. White

ar	t 2: Tell the Court About	Your E	Bankruptcy Ca	se				
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Chapter 7						
	choosing to file under							
			Chapter 11					
			Chapter 12					
			Chapter 13					
3.	How you will pay the fee	■ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local or about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashing order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit a pre-printed address.						ney
					stallments. If you choose the ts (Official Form 103A).	nis option, sign and attach t	he Application for Individuals to P	ay
		☐ I request that my fee be waived (You may request this option only if but is not required to, waive your fee, and may do so only if your incomplies to your family size and you are unable to pay the fee in instal the Application to Have the Chapter 7 Filing Fee Waived (Official For				nly if your income is less the se fee in installments). If yo	an 150% of the official poverty line u choose this option, you must fill	that
) .	Have you filed for							
•	bankruptcy within the	■ N						
	last 8 years?	ПΥ			\A/I ₂ a	0		
			District		When When		number	
			District		When		number number	
			District		when	Case	Thumber	
10.	Are any bankruptcy cases pending or being	■ N	0					
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	ΠY	es.					
			Debtor			Relation	onship to you	
			District		When	Case r	number, if known	
			Debtor			Relation	onship to you	
			District		When	Case r	number, if known	
11.	Do you rent your residence?	ПΝ	o. Go to li	ine 12.				
	residence:	■ Y	es. Has yo	ur landlord obt	ained an eviction judgment	against you and do you wa	ant to stay in your residence?	
				No. Go to line	12.			
				Yes. Fill out Ir bankruptcy pe		viction Judgment Against Y	ou (Form 101A) and file it with this	S

Debtor 1	Marcqueisha T. White	Document	Page 4 of 63	Case number (if known)	

ar	Report About Any Bu	sinesses `	You Own	as a Sole Proprieto	or		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of busin	ness		
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	er, Street, City, State	e & ZIP Code		
	it to this petition.		Check	the appropriate box	to describe your business:		
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))		
				Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))		
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))		
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))		
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate it. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of s, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure .C. 1116(1)(B).				
	For a definition of small	■ No.	I am n	ot filing under Chapt	ter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.			
		☐ Yes.	I am fi	ling under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.		
art	t 4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	Yes.	What is t	he hazard?			
	public health or safety? Or do you own any property that needs			iate attention is			
	immediate attention?		needed,	why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?			
					Number, Street, City, State & Zip Code		

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Debtor 1 Marcqueisha T. White

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Page 6 of 63 Document Case number (if known) Debtor 1 Marcqueisha T. White Part 6: **Answer These Questions for Reporting Purposes** 16. What kind of debts do 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500.001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Marcqueisha T. White

Marcqueisha T. White Signature of Debtor 1

Executed on September 7, 2017

MM / DD / YYYY

Signature of Debtor 2

MM / DD / YYYY

Executed on

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Debtor 1 Marcqueisha T. White Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Stuart I	B. Handelman	Date	September 7, 2017	
Signature of	f Attorney for Debtor		MM / DD / YYYY	
Stuart B. H	Handelman			
The Law C	Offices of Stuart B. Handelman, P.C.			
200 S. Mic Chicago, I	chigan Avenue, Suite 205 IL 60604			
Number, Street,	City, State & ZIP Code			
Contact phone	(312) 360-0500	Email address	court@sbhpc.net	
6195779				
Par number 9 C	toto.			

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Debtor 1 Marcqueisha T. White			Case number (# known)					
art			sporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
	•		☐ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily be money for a business or inve	usi ness debts? <i>Business debts</i> are debts ti estment or through the operation of the busin	hat you incurred to obtain ness or investment.			
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you o	owe that are not consumer debts or business	s debts			
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	r 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and administrative expenses	Yes.	I am filing under Chapter 7. are paid that funds will be at	Do you estimate that after any exempt propo vallable to distribute to unsecured creditors?	erty is excluded and administrative expenses			
	are paid that funds will							
	be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do 1-49			1,000-5,000	25,001-50,000			
	you estimate that you owe?	☐ 50-9 ^s		☐ 5001-10,000	□ 50,001-100,000 □ 50,001-100,000			
		☐ 100- ☐ 200-		□ 10,001-25,000	☐ More than100,000			
19.	How much do you		\$50,000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion			
	estimate your assets to be worth?		930,000 001 - \$100,000	\$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
	De WORUT	□ \$100	0,001 - \$500,000 0,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you	= 80.	\$50,000	☐ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion			
	estimate your liabilities to be?	• -	,001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion			
	to ne i		0,001 - \$500,000 0,001 - \$1 million	☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
Pai	t 7: Sign Below							
Fo	ryou	I have e	have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have United	e chosen to file under Chapter States Code. I understand the	r 7, I am aware that I may proceed, if eligible relief available under each chapter, and I c	, under Chapter 7, 11,12, or 13 of title 11, hoose to proceed under Chapter 7.			
docume			no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this ocument, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
			equest relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		bankru and 38	ptcy case can result in fines u	nt, concealing property, or obtaining money p to \$250,000, or imprisonment for up to 20 Signature of Debti	years, or both. 18 U.S.C. §§ 152, 1341, 1519			
			ure of Debter 1	-				
		Execut	sed on September 7, 201		M/DD/YYYY			

Fill in this informa	ntion to identify your	case:			
Debtor 1	Marcqueisha T. V	/hite			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse If, filing)	First Name	Middle Name	Last Name		
United States Bank	kruptcy Court for the:	NORTHERN DISTRIC	CT OF ILLINOIS		
Case number					
(if known)					Check if this is an amended filing
Official Form Declarati		ın Individua	ıl Debtor's Sci	hedules	12/15
If two married peo	ple are filing togethe	r, both are equally resp	consible for supplying corn	ect information.	
obtaining money of	form whenever you for property by fraud i U.S.C. §§ 152, 1341,	n connection with a ba	es or amended schedules. nkruptcy case can result in	Making a false statement, c r fines up to \$250,000, or im	oncealing property, or prisonment for up to 20
Sign	Below				
Did you pay	or agree to pay some	one who is NOT an at	torney to help you fill out be	ankruptcy forms?	
™ No					
☐ Yes. Na	ame of person				Petition Preparer's Notice, gnature (Official Form 119)
	y of perjury, I declare true and correct.	A	ımmary and schedules filed	d with this declaration and	
× () ()	WALIDA	Mulle	×		
	elsha T. White e of Debtor 1	<u></u>	Signature of	Debtor 2	
Date S	eptember 7, 2017		Date		

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Debtor 1	Marcqueisha 1	r. White		Case number (if known)	
ara trua	and correct Lunda	rstand that making a fals	se statement, concealing pr	operty, or obtaining money or property by fraud in connection	n
with a b	ankruptcy case can	result in fines up to \$25	0,000, or imprisonment for	up to 20 years, or both.	
18 U.S.	55 052, 1341, 151 OULALLIMU	9, and 3571.			
Marca	ueisha T White		Signature of Debtor 2		
Signatu	ire of Deptor 1				
Date _	September 7, 20	17	Date	-	
Did you	attach additional p	ages to Your Statement	of Financial Affairs for Indiv	riduals Filing for Bankruptcy (Official Form 107)?	
■ No					
☐ Yes					
Did you	pay or agree to pay	y someone who is not an	attorney to help you fill ou	t bankruptcy forms?	
■ No					
□Yes	Name of Person	. Attach the Bankruptc	v Petition Preparer's Notice, [Declaration, and Signature (Official Form 119).	

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Debtor 1	Marcqueisha T. White	Case number (if known)	
Descriptio Property:	n of leased		☐ Yes
Lessor's r	ame: n of leased		□ No
Property:			☐ Yes
Lessor's r	name: en of leased		□ No
Property:	ni (i) leaseu		☐ Yes
Lessor's r	name: on of leased		□ No
Property:	a di labad		☐ Yes
Lessor's i			□ No
Property:	on of leased		☐ Yes
Part 3:	Sign Below		
Jnder pe property	naity of perjury, I declare that I have indicated my intention a that is subject to an unexpired lease.	bout any property of my estate that se	cures a debt and any personal
Mai	requelsha T. White lature of Debtor 1	Signature of Debtor 2	
Date	September 7, 2017	Date	

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United States Bankruptcy Court Northern District of Illinois

		TOTAL DESIGNATION		
In re	Marcqueisha T. White	Debtor(s)	Case No. Chapter 7	
	VI	ERIFICATION OF CREDITOR M		
		Number of	Creditors:	41
	The above-named Debtor(s (our) knowledge.) hereby verifies that the list of credit	tors is true and correct to	the best of my
Date:	September 7, 2017	Marcqueisha T. White Signature of Debtor	white	·

		Docume	nt Page 13 of 63	
Fill in this info	rmation to identify your	case:		
Debtor 1	Marcqueisha T. V	Vhite		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
Jnited States B	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	1,951.48
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,951.48
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	3,600.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	27,659.66
	Your total liabilities	\$	31,259.66
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,135.51
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,034.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Case number (if known) Debtor 1 Marcqueisha T. White

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

548.21 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	im
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

	30 17 20010	Document	Page 15 of 63	7 Describant
Fill in this inform	ation to identify your	case and this filing:		
Debtor 1	Marcqueisha T. \			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	NORTHERN DISTRICT OF I	LLINOIS	
Case number			_	☐ Check if this is an amended filing
Official For	m 106A/B			
Schedule	A/B: Prop	erty		12/15
think it fits best. Be information. If more Answer every questi	as complete and accura space is needed, attach on.	ate as possible. If two married pe a a separate sheet to this form. O	If an asset fits in more than one category, list the ople are filing together, both are equally responsen the top of any additional pages, write your names.	sible for supplying correct
Part 1: Describe E	ach Residence, Building	g, Land, or Other Real Estate You	Own or Have an Interest In	
1. Do you own or ha	ive any legal or equitabl	e interest in any residence, build	ing, land, or similar property?	
■ No. Go to Part	2.			
☐ Yes. Where is	the property?			
Part 2: Describe Y	our Vehicles			
			es, whether they are registered or not? Incli E: Executory Contracts and Unexpired Leases	
3. Cars, vans, true	cks, tractors, sport u	tility vehicles, motorcycles		
■ No				
☐ Yes				
			ehicles, other vehicles, and accessories, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
			s from Part 2, including any entries for 	\$0.00
Part 3: Describe Y	our Personal and Hous	ehold Items		
		able interest in any of the fol	lowing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples: Majo ■ No	.,	e, linens, china, kitchenware		·
☐ Yes. Describ	J C			
inclu ■ No	uding cell phones, cam	dio, video, stereo, and digital e neras, media players, games	quipment; computers, printers, scanners; mus	sic collections; electronic devices
☐ Yes. Describ	oe			

Official Form 106A/B Schedule A/B: Property page 1

	Case 17-2	6815	Doc 1	Filed 09/07/17	Entered 09/07/17 14:1 Page 16 of 63	.7:07	Desc Main
Debtor 1	Marcqueisha	T. White)	Document	Case number	(if known)	
Example ■ No	bles of value es: Antiques and fi other collection				oks, pictures, or other art objects; sta	ımp, coin,	or baseball card collections;
Example No	ent for sports and es: Sports, photog musical instrur Describe	raphic, ex		ther hobby equipment;	bicycles, pool tables, golf clubs, skis	; canoes a	nd kayaks; carpentry tools;
10. Firearn Examp ■ No		shotguns	, ammunition	, and related equipment	t		
	Describe						
□ No ´		hes, furs,	leather coats	s, designer wear, shoes	accessories		
		Clothes Location		erry Hills Dr., Flossi	moor IL 60422		\$200.00
13. Non-fa l <i>Examp</i> □ No	rm animals bles: Dogs, cats, bi Describe	rds, horse	n: 3728 Ch	erry Hills Dr., Flossi	moor IL 60422	1	<u>\$1,530.00</u>
		One Dog		erry Hills Dr., Flossi	moor IL 60422		\$0.00
■ No	her personal and		-	ı did not already list, iı	ncluding any health aids you did r	ot list	
				om Part 3, including a	ny entries for pages you have atta	ched	\$1,730.00
	scribe Your Financi n or have any leç		uitable intere	est in any of the follow	ing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash Examp □ No ■ Yes	oles: Money you ha	ave in you	r wallet, in yo	our home, in a safe depo	osit box, and on hand when you file y	our petitio	on .

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Case number (if known) Document

Debtor 1 Marcqueisha T. White

				Cash	\$20.00
institutio □ No	ng, savings, o ons. If you ha		s with the same institution, list each	res in credit unions, brokerage hou ch.	uses, and other similar
Yes			Institution name:		
	17.1.	Checking	Citibank		\$0.00
	17.2.	Checking	Citibank		\$1.48
	17.3.	Checking	Bank of America		\$200.00
18. Bonds, mutual fun <i>Examples:</i> Bond fu			okerage firms, money market acc	counts	
■ No □ Yes		Institution or issuer	name:		
19. Non-publicly trade joint venture ■ No	ed stock and	interests in incorp	oorated and unincorporated bus	sinesses, including an interest in	າ an LLC, partnership, and
☐ Yes. Give specifi		about them me of entity:		% of ownership:	
Negotiable instrum Non-negotiable ins	ents include p	personal checks, ca	otiable and non-negotiable inst shiers' checks, promissory notes, ansfer to someone by signing or o	, and money orders.	
■ No □ Yes. Give specific	c information	ahout them			
Tes. Cive specific		uer name:			
21. Retirement or pen- Examples: Interest			403(b), thrift savings accounts, or	other pension or profit-sharing pla	ans
☐ Yes. List each ac		tely. of account:	Institution name:		
Examples: Agreem	nused deposi	ts you have made s	o that you may continue service of public utilities (electric, gas, water	or use from a company er), telecommunications companies	s, or others
■ No □ Yes			Institution name or individ	dual:	
23. Annuities (A contra	act for a perio	dic payment of mon	ey to you, either for life or for a nu	umber of years)	
☐ Yes	Issuer nam	ne and description.			
24. Interests in an edu 26 U.S.C. §§ 530(b)			qualified ABLE program, or und	ler a qualified state tuition progr	am.
Yes	Institution i	name and description	on. Separately file the records of a	iny interests.11 U.S.C. § 521(c):	
25. Trusts, equitable of	or future inte	rests in property (other than anything listed in lin	e 1), and rights or powers exerc	isable for your benefit

☐ Yes. Give specific information about them...

De	ebtor 1	Marcqueisha T. White		Document	Page 18 of 63 Case number (if known)	Desc Main
	Exam _i ■ No	ts, copyrights, trademarks, ples: Internet domain names,	websites, pro			
	Exam ■ No	ses, franchises, and other g ples: Building permits, exclus Give specific information ab	ive licenses, c		n holdings, liquor licenses, professional licens	es
M	oney or	property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
	■ No	funds owed to you Give specific information about	out them, inclu	uding whether you alre	ady filed the returns and the tax years	
	Exam ■ No	/ support ples: Past due or lump sum a Give specific information		sal support, child suppo	ort, maintenance, divorce settlement, property	settlement
	Exam _i ■ No	amounts someone owes your ples: Unpaid wages, disability benefits; unpaid loans your Give specific information	, insurance pa		efits, sick pay, vacation pay, workers' compe	nsation, Social Security
31.		sts in insurance policies ples: Health, disability, or life	insurance; he	alth savings account (HSA); credit, homeowner's, or renter's insurar	nce
	☐ Yes.	Name the insurance compar Comp	ny of each poli any name:	icy and list its value.	Beneficiary:	Surrender or refund value:
	If you somed	aterest in property that is duare the beneficiary of a living one has died. Give specific information	ue you from s trust, expect	comeone who has die proceeds from a life in	ed surance policy, or are currently entitled to rec	eive property because
	Exam _i ■ No	s against third parties, whe ples: Accidents, employment Describe each claim			it or made a demand for payment to sue	
34.	■ No	contingent and unliquidate Describe each claim	d claims of e	very nature, includin	g counterclaims of the debtor and rights to	set off claims
	■ No	nancial assets you did not a	already list			
36	. Add	the dollar value of all of you	ur entries froi	m Part 4, including a	ny entries for pages you have attached	¢224_40

for Part 4. Write that number here.....

\$221.48

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

page 4

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Case number (if known) Document Debtor 1 Marcqueisha T. White 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$0.00 57. Part 3: Total personal and household items, line 15 \$1,730.00 Part 4: Total financial assets, line 36 58. \$221.48 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$1,951.48 \$1,951.48

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$1,951.48

		I A A A HILL.	111111111111111111111111111111111111111	
Fill in this inform	mation to identify your	case:		
Debtor 1	Marcqueisha T. V	Vhite		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				
(if known)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
Clothes Location: 3728 Cherry Hills Dr.,	\$200.00		\$200.00	735 ILCS 5/12-1001(a)
Flossmoor IL 60422 Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
Jewelry Location: 3728 Cherry Hills Dr.,	\$1,530.00		\$30.00	735 ILCS 5/12-1001(b)
Flossmoor IL 60422 Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	
Cash Line from Schedule A/B: 16.1	\$20.00		\$20.00	735 ILCS 5/12-1001(b)
Ellie Holli Genedale PAB. 10.1			100% of fair market value, up to any applicable statutory limit	
Checking: Citibank Line from Schedule A/B: 17.2	\$1.48		\$1.48	735 ILCS 5/12-1001(b)
Ellie Holli Schedule PVD. TT.E			100% of fair market value, up to any applicable statutory limit	
Checking: Bank of America Line from Schedule A/B: 17.3	\$200.00		\$200.00	735 ILCS 5/12-1001(b)
Line from obligation PVD. 11.0			100% of fair market value, up to any applicable statutory limit	

Case 17-26815 Filed 09/07/17 Entered 09/07/17 14:17:07 Desc Main Document Page 21 of 63 Debtor 1 Marcqueisha T. White Case number (if known) 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No

Doc 1

Yes

Cas	se 17-26815	Doc 1 Filed 09/07/17 Document	Page 2	ed 09/07/17 14:: 2 of 63	17:07 Desc N	iain
Fill in this inform	ation to identify you					
Debtor 1	Marcqueisha T.	White				
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ban	kruptcy Court for the	: NORTHERN DISTRICT OF ILL	INOIS			
Case number						
(if known)					_	if this is an
					amend	ded filing
Official Form	106D					
		Who Have Claims	Secure	d by Propert	v	12/15
				<u> </u>		
		If two married people are filing togeth out, number the entries, and attach it				
. Do any creditors h	nave claims secured b	y your property?				
☐ No. Check	this box and submit t	his form to the court with your other	schedules.	ou have nothing else t	o report on this form.	
Yes. Fill in a	all of the information	below.				
Part 1: List All	Secured Claims					
		more than one secured claim, list the cre	editor senaratel	Column A	Column B	Column C
for each claim. If mo	re than one creditor has	s a particular claim, list the other creditor	s in Part 2. As	Amount of claim Do not deduct the	Value of collateral	Unsecured portion
	t the claims in alphabet	ical order according to the creditor's nam	ie.	value of collateral.	that supports this claim	If any
2.1 Rogers & H	Hollands	Describe the property that secures	the claim:	\$3,600.00	\$1,530.00	\$2,070.00
Creditor's Name		Jewelry Location: 3728 Cherry Hills	Dr			
		Flossmoor IL 60422	Di.,			
P.O. Box 8	79	As of the date you file, the claim is: apply.	Check all that			
Matteson,	IL 60443	Contingent				
Number, Street, 0	City, State & Zip Code	☐ Unliquidated				
		Disputed				
Who owes the deb	ot? Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		☐ An agreement you made (such as car loan)	mortgage or se	ecured		
Debtor 2 only		_				
Debtor 1 and Deb	•	☐ Statutory lien (such as tax lien, me	chanic's lien)			
_	e debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this cla community deb		Other (including a right to offset)	Purchase	Money Security		
Date debt was incu	rred 2015	Last 4 digits of account num	ber <u>1004</u>			
Add the dollar val	ue of your entries in C	Column A on this page. Write that num	ber here:	\$3.60	0 00	

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$3,600.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

		Document	Page 2	3 of 63	
Fill in this	information to identify your	case:			
Debtor 1	Marcqueisha T. W	/hite			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filir	ng) First Name	Middle Name	Last Name		
	-				
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT OF ILI	LINOIS		
Case numl	ber				
(if known)					☐ Check if this is an
					amended filing
Official	Form 106E/F				
		ho Have Unsecured	Claims		12/15
chedule G: chedule D: eft. Attach t ame and ca	Executory Contracts and Unexp Creditors Who Have Claims Sec the Continuation Page to this pag ase number (if known).	ired Leases (Official Form 106G). Dured by Property. If more space is e. If you have no information to re	o not include needed, copy	ontracts on Schedule A/B: Property (any creditors with partially secured on the Part you need, fill it out, number to the top of any	laims that are listed in he entries in the boxes on the
	List All of Your PRIORITY Un				
′	creditors have priority unsecure	d claims against you?			
_	Go to Part 2.				
☐ Yes. Part 2:	List All of Your NONPRIORIT	V II			
	You have nothing to report in this p	art. Submit this form to the court with	your other sch	dules.	
	of your nonpriority unsecured cla			holds each claim. If a creditor has mo	
4. List all unsecur	of your nonpriority unsecured claim, list the creditor separately	/ for each claim. For each claim listed	, identify what t	holds each claim. If a creditor has mo ype of claim it is. Do not list claims alrea three nonpriority unsecured claims fill o	dy included in Part 1. If more
4. List all unsecur than one	of your nonpriority unsecured claim, list the creditor separately	/ for each claim. For each claim listed	, identify what t	ype of claim it is. Do not list claims alrea	dy included in Part 1. If more
4. List all unsecut than on Part 2.	of your nonpriority unsecured clared claim, list the creditor separately the creditor holds a particular claim, list the creditor holds a particular claim.	/ for each claim. For each claim listed	, identify what t nave more than	ype of claim it is. Do not list claims alrea	dy included in Part 1. If more ut the Continuation Page of
4. List all unsecur than on Part 2.	of your nonpriority unsecured clared claim, list the creditor separately the creditor holds a particular claim, list the creditor holds a particular claim.	/ for each claim. For each claim listed st the other creditors in Part 3.If you h	, identify what the nave more than than ount number	ype of claim it is. Do not list claims alrea three nonpriority unsecured claims fill o	ndy included in Part 1. If more ut the Continuation Page of
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4. List all unsecut than on Part 2. 4.1 Al No P. Bl Nu Wh	of your nonpriority unsecured claim, list the creditor separately the creditor holds a particular claim, list the creditor separately the creditor holds a particular claim, list priority Creditor's Name O. Box 380902 Icomington, MN 55438 Imber Street City State Zlp Code the incurred the debt? Check one.	/ for each claim. For each claim listed st the other creditors in Part 3.lf you have been stated as the other creditors in Part 3.lf you have been stated as the digits of acc. When was the debt As of the date you have	, identify what the nave more than ount number incurred?	ype of claim it is. Do not list claims alreathree nonpriority unsecured claims fill o	ndy included in Part 1. If more ut the Continuation Page of
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4. List all unsecur than one Part 2. 4.1 Al No P. Bl Nu Wh	of your nonpriority unsecured claim, list the creditor separately the creditor holds a particular claim, list the creditor separately the creditor holds a particular claim, list the creditor holds a particular claim, list the creditor in Name O. Box 380902 Indiana Street City State Zlp Code the incurred the debt? Check one. Debtor 1 only Debtor 2 only	Last 4 digits of acc When was the debt As of the date you to Contingent Unliquidated	, identify what the nave more than ount number incurred?	ype of claim it is. Do not list claims alreathree nonpriority unsecured claims fill o	ndy included in Part 1. If more ut the Continuation Page of
4. List all unsecut than one Part 2. 4.1 Al No P. Bl Nu Wh	of your nonpriority unsecured claim, list the creditor separately the creditor holds a particular claim, list the creditor separately the creditor holds a particular claim, list the creditor holds a particular claim, list the creditor of	Last 4 digits of acc When was the debt As of the date you to Contingent Unliquidated Disputed	, identify what the nave more than ount number incurred?	ype of claim it is. Do not list claims alreathree nonpriority unsecured claims fill of the company of the compa	ndy included in Part 1. If more ut the Continuation Page of
4. List all unsecut than one Part 2. 4.1 Al No P. Bli Nu Wr	of your nonpriority unsecured claim, list the creditor separately the creditor holds a particular claim, list the creditor separately the creditor holds a particular claim, list the creditor holds a particular claim, list the creditor to calculate the	Last 4 digits of acc When was the debt As of the date you is Contingent Unliquidated Disputed Type of NONPRIOR	, identify what the nave more than ount number incurred?	ype of claim it is. Do not list claims alreathree nonpriority unsecured claims fill of the company of the compa	ndy included in Part 1. If more ut the Continuation Page of
4. List all unsecut than one Part 2. 4.1 Al No P. Bl Nu Wh	of your nonpriority unsecured claim, list the creditor separately the creditor holds a particular claim, list the creditor separately the creditor holds a particular claim, list the creditor holds a particular claim, list the creditor of the creditor separately considered to the creditor of the content of the creditor of the content o	Last 4 digits of acc When was the debt As of the date you to the contingent Unliquidated Disputed Type of NONPRIOR Type of NONPRIOR Unliquity Obligations arisin	identify what the count number incurred? file, the claim in the claim	ype of claim it is. Do not list claims alreathree nonpriority unsecured claims fill of the company of the compa	total claim Total claim \$2,000.00
4. List all unsecur than one Part 2. 4.1 Al No P. Bl Nu Wr	of your nonpriority unsecured claim, list the creditor separately the creditor holds a particular claim, list the creditor separately the creditor holds a particular claim, list the creditor holds a particular claim, list the creditor holds a particular claim, list the claim separately the claim separately the claim separately the claim subject to offset?	Last 4 digits of acc When was the debt As of the date you to ther Unliquidated Unliquidated Type of NONPRIOR Student loans Obligations arisin report as priority clair	, identify what the nave more than the nave more th	ype of claim it is. Do not list claims alreathree nonpriority unsecured claims fill of 7654 S: Check all that apply	to the Continuation Part 1. If more ut the Continuation Page of Total claim \$2,000.00
4. List all unsecut than on Part 2. 4.1 Al No P. Bi Nu Wr	of your nonpriority unsecured claim, list the creditor separately the creditor holds a particular claim, list the creditor separately the creditor holds a particular claim, list the creditor holds a particular claim, list the creditor of the creditor separately considered to the creditor of the content of the creditor of the content o	Last 4 digits of acc When was the debt As of the date you to ther Unliquidated Unliquidated Type of NONPRIOR Student loans Obligations arisin report as priority clair	, identify what the count number incurred? File, the claim incurred gout of a separation or profit-sharing incurred separation.	ype of claim it is. Do not list claims alreathree nonpriority unsecured claims fill of the proof	to the Continuation Part 1. If more ut the Continuation Page of Total claim \$2,000.00

Document Page 24 of 63 Debtor 1 Marcqueisha T. White Case number (if know) 4.2 \$2,098.40 Capital One Bank USA NA Last 4 digits of account number 2121 Nonpriority Creditor's Name PO Box 30281 When was the debt incurred? Salt Lake City, UT 84130 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.3 Capital One Bank, (USA), N.A. Last 4 digits of account number 4430 \$3,896.17 Nonpriority Creditor's Name P.O. Box 6492 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other, Specify **Comenity - Pier 1 Imports** 4.4 Last 4 digits of account number 0678 \$484.85 Nonpriority Creditor's Name P.O. Box 659617 When was the debt incurred? San Antonio, TX 78265-9617 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No
□ Yes

Other. Specify Credit Card

Debts to pension or profit-sharing plans, and other similar debts

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Debtor 1 Marcqueisha T. White Case number (if know) 4.5 \$1,401.86 Comenity - Pottery Barn Last 4 digits of account number 1597 Nonpriority Creditor's Name P.O. Box 659705 When was the debt incurred? San Antonio, TX 78265-9705 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.6 **Comenity - Victoria's Secret** Last 4 digits of account number 4196 \$1,545.91 Nonpriority Creditor's Name P.O. Box 659728 When was the debt incurred? San Antonio, TX 78265-9728 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Credit Card** Other. Specify 4.7 **Department Stores Nation** Last 4 digits of account number 0266 \$1,324.68 Nonpriority Creditor's Name P.O. Box 8218 When was the debt incurred? Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Credit Card

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Debtor 1 Marcqueisha T. White Case number (if know) 4.8 \$776.09 **Department Stores Nation** Last 4 digits of account number 6327 Nonpriority Creditor's Name P.O. Box 8218 When was the debt incurred? Mason, OH 45040 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes 4.9 **Department Stores National Bank** Last 4 digits of account number 3271 \$326.09 Nonpriority Creditor's Name PO Box 183083 When was the debt incurred? Columbus, OH 43218 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.1 **Department Stores National Bank** 2661 \$874.68 Last 4 digits of account number 0 Nonpriority Creditor's Name PO Box 183083 When was the debt incurred? Columbus, OH 43218 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Debte	or 1 Marcqueisha T. White	Document Page 27 of 63 Case number (if know)					
4.1 1	Franciscan Alliance, Inc.	9275,6508,9 Last 4 digits of account number 275	\$515.00				
	Nonpriority Creditor's Name 28044 Network Place Chicago, IL 60673	When was the debt incurred?					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
Yes		■ Other. Specify Medical Bills					
4.1	Ingalls Health System	Last 4 digits of account number 5841	\$1,403.56				
	Nonpriority Creditor's Name						
	PO Box 27685 Chicago, IL 60673	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:					
	\square Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	Other. Specify Medical Bills					
4.1	Lvnv Funding, LLC.	Last 4 digits of account number 5294	\$2,023.06				
3	Nonpriority Creditor's Name	Last 4 digits of account number	ΨΞ,0Ξ0.00				
	P.O. Box 10497 Greenville, SC 29603	When was the debt incurred?					
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply					
	Who incurred the debt? Check one.						
	Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	Disputed					
	At least one of the debters and another	Type of NONPRIORITY unsecured claim:					

At least one of the debtors and another \square Student loans $\hfill\Box$ Check if this claim is for a community $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims debt Is the claim subject to offset? ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Collection ☐ Yes

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Debtor 1 Marcqueisha T. White Case number (if know) 4.1 Midland Funding LLC 0632 \$1,126.67 Last 4 digits of account number 4 Nonpriority Creditor's Name P.O. Box 93919 When was the debt incurred? San Diego, CA 92193-9019 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Collection ☐ Yes 4.1 Midland Funding LLC 4290 \$1,254.52 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 93919 San Diego, CA 92193-9019 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify Collection ☐ Yes 4.1 Midland Funding LLC 9254 \$647.49 Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 93919 When was the debt incurred? San Diego, CA 92193-9019 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

■ Other. Specify Collection

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Document Page 29 of 63 Debtor 1 Marcqueisha T. White Case number (if know) 4.1 **Nordstom Card Services** 7992 \$569.12 Last 4 digits of account number Nonpriority Creditor's Name PO Box 6566 When was the debt incurred? Englewood, CO 80155 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Credit Card 4.1 Pathology Consultants, Inc. 7404 \$65.75 Last 4 digits of account number 8 Nonpriority Creditor's Name When was the debt incurred? 5935 Rivers Ave., Ste. 101 Charleston, SC 29406 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.1 Pathology Consultants, Inc. 5110 \$184.24 9 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 30309 When was the debt incurred? Charleston, SC 29417-0309 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

Other. Specify

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Medical Bills

Is the claim subject to offset?

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Debtor 1 Marcqueisha T. White Case number (if know) 4.2 Pathology Consultants, Inc. 2110 \$478.97 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 30309 When was the debt incurred? Charleston, SC 29417-0309 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical Bills 4.2 Pier 1 Imports 0678 \$530.85 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 1203 St. Cloud, MN 56396-1203 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit card ☐ Yes 4.2 **Professional Clinical Laboratories** 7348,6827 \$517.05 Last 4 digits of account number Nonpriority Creditor's Name 26051 Network Place When was the debt incurred? Chicago, IL 60673-1260 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes

Other. Specify

Medical Bills

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Debtor 1 Marcqueisha T. White Case number (if know) 4.2 Radiology Imaging Consultants CORI \$8.63 Last 4 digits of account number 3 Nonpriority Creditor's Name 75 Remittance DR Dept 1254 When was the debt incurred? Chicago, IL 60675 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Bills ☐ Yes 4.2 Southwest Laboratory Physician 5801 \$38.30 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Dept. 77-9288 Chicago, IL 60678-9288 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.2 Specialty Physicians of Illinois \$101.52 1363,9274 Last 4 digits of account number Nonpriority Creditor's Name 38132 Eagle Way When was the debt incurred? Chicago, IL 60678 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Bills** Other. Specify

Page 32 of 63 Case number (if know) Document Debtor 1 Marcqueisha T. White 4.2 Sullivan Urgent Aid Centers Ltd 2770 \$39.53 Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 5990 When was the debt incurred? Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes ■ Other. Specify Medical Bills 4.2 Sullivan Urgent Aid Centers LTD 8029 \$48.90 Last 4 digits of account number Nonpriority Creditor's Name PO Box 740023 When was the debt incurred? Cincinnati, OH 45274 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Bills ☐ Yes 4.2 Synchrony Bank 5023 \$1.667.74 Last 4 digits of account number 8 Nonpriority Creditor's Name P.O. Box 960061 When was the debt incurred? Orlando, FL 32896-0061 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Credit Card

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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Page 33 of 63 Document Case number (if know) Debtor 1 Marcqueisha T. White 4.2 Synchrony Bank/JCP 2541 \$505.37 Last 4 digits of account number 9 Nonpriority Creditor's Name P.O. Box 960090 When was the debt incurred? Orlando, FL 32896-0090 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.3 Synchrony Bank/Walmart 4307 \$1,204.66 Last 4 digits of account number 0 Nonpriority Creditor's Name P.O. Box 965024 When was the debt incurred? Orlando, FL 32896 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? ARS National Services, Inc. Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 469046 Part 2: Creditors with Nonpriority Unsecured Claims Escondido, CA 92046 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Blitt & Gaines, P.C. Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 661 Glenn Avenue Part 2: Creditors with Nonpriority Unsecured Claims Wheeling, IL 60090 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Blitt & Gaines, P.C. Line 4.14 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 661 Glenn Avenue Part 2: Creditors with Nonpriority Unsecured Claims Wheeling, IL 60090 Last 4 digits of account number

Name and Address Blitt & Gaines, P.C. 661 Glenn Avenue

Wheeling, IL 60090

Official Form 106 E/F

On which entry in Part 1 or Part 2 did you list the original creditor?

Line 4.2 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Schedule E/F: Creditors Who Have Unsecured Claims

Page 34 of 63 Case number (if know) Debtor 1 Marcqueisha T. White Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Client Services, Inc. Line 4.9 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims PO Box 1503 ■ Part 2: Creditors with Nonpriority Unsecured Claims Saint Peters, MO 63376 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Client Services, Inc. Line 4.30 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 3451 Harry S. Truman Blvd. Part 2: Creditors with Nonpriority Unsecured Claims St. Charles, MO 63301 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Creditors Collection Bureau In Line **4.22** of (*Check one*): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 63 ■ Part 2: Creditors with Nonpriority Unsecured Claims Kankakee, IL 60901 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **ERC** Line 4.30 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 23870 ■ Part 2: Creditors with Nonpriority Unsecured Claims Jacksonville, FL 32241-3870 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Firstsource Line 4.3 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 205 Bryant Woods South Part 2: Creditors with Nonpriority Unsecured Claims Amherst, NY 14228 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **FMA Alliance** Line 4.21 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.o. Box 2409 Part 2: Creditors with Nonpriority Unsecured Claims Houston, TX 77252 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address HRRG Line 4.26 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 5406 Part 2: Creditors with Nonpriority Unsecured Claims Cincinnati, OH 45273-7942 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Komyatte & Associates Line 4.18 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 9650 Gordon Drive ■ Part 2: Creditors with Nonpriority Unsecured Claims Highland, IN 46322 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Midland Credit Management, Inc. Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2365 Northside Drive, Suite 300 Part 2: Creditors with Nonpriority Unsecured Claims San Diego, CA 92108 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Midland Credit Management, Inc. Line 4.16 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 2365 Northside Drive, Suite 300 Part 2: Creditors with Nonpriority Unsecured Claims San Diego, CA 92108 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Northland Group, Inc. Line 4.10 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 390905 ■ Part 2: Creditors with Nonpriority Unsecured Claims Edina, MN 55439 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor?

United Recovery Systems, LP PO Box 722910

Line 4.7 of (Check one):

☐ Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

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Debtor 1 Marcqueisha T. White		Ū	Case number (if know)			
Houston, TX 77272-2910						
•	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2	On which entry in Part 1 or Part 2 did you list the original creditor?				
United Recovery Systems, LP	Line 4.8 of (<i>Check one</i>):	☐ Part 1: Creditors with Priority Unsecured Claims				
PO Box 722910		1	■ Part 2: Creditors with Nonpriority Unsecured Claims			
Houston, TX 77272-2910	Last 4 digits of account number					
Name and Address	On which entry in Part 1 or Part 2 did you list the original creditor?					
Valentine & Kebartas, Inc.	Line 4.13 of (<i>Check one</i>):		Part 1: Creditors with Priority Unsecured Claims			
P.O. Box 325 Lawrence, MA 01842		ı	Part 2: Creditors with Nonpriority Unsecured Claims			
·	Last 4 digits of account number					

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				1	Γotal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	6f.	Student loans	6f.		Total Claim
Total	ОІ.	Student loans	о.	\$	0.00
claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.		6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	27,659.66
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	27,659.66

		17(7,1111)		
Fill in this infor	mation to identify your	case:		
Debtor 1	Marcqueisha T. V	Vhite		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	h whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	
2.4	•				
	Name				_
	Number	Street			-
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	<u> </u>

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		Docume	ent Page 37 o	ot 63	_
Fill in this	information to identify your	case:			
Debtor 1	Maraguaisha T V	White			
Deptor 1	Marcqueisha T. V	Middle Name	Last Name		
Debtor 2					
(Spouse if, filin	ng) First Name	Middle Name	Last Name		
United Sta	ites Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num (if known)	ber				☐ Check if this is an
()					amended filing
					1 aaa
Officia	I Form 106H				
	lule H: Your Cod	obtors			40/45
Sched	iule n. Your Cou	eprorz			12/15
	and case number (if known)			e as a codebtor.	
■ No					
— 103	,				
	hin the last 8 years, have you na, California, Idaho, Louisiana				rty states and territories include)
■ No	Go to line 3.				
	s. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
		aco, or rogar equivalent inte	, man you at ano anno.		
in line Form out Co	2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	sure you have listed to	ng with you. List the person shown the creditor on Schedule D (Official, Schedule E/F, or Schedule G to fill reditor to whom you owe the debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedul	
3.1				□ Sahadula D III	20
	Name			⊔ Schedule D, lir □ Schedule E/F,	
				☐ Schedule G, lii	
_					
	Number Street	04-4-	71D O - 4-		
	City	State	ZIP Code		
3.2				□ Cobodulo D 15	20
	Name			Schedule D, lin	
				☐ Schedule E/F,	
				☐ Schedule G, lii	ne
	Number Street			_	
	City	State	ZIP Code		

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Fill	in this information to identify your c	ase:									
Del	otor 1 Marcqueish	a T. White									
	otor 2 ouse, if filing)				_						
Uni	ted States Bankruptcy Court for the	: NORTHERN DISTRIC	CT OF ILLINOIS								
(If kr	fficial Form 106I		-			☐ An ☐ A s		d filing ent showin as of the fo		petition cha g date:	apter
	chedule I: Your Inc										12/15
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not filii Ir spouse is not filing wi	ng jointly, and your sp ith you, do not include	oouse i e infori	s liv natio	ing with y on about y	ou, incli our spo	ude inforr ouse. If m	nation ore spa	about you ace is need	ur ded,
1.	Fill in your employment information.		Debtor 1	Debtor 1		I	Debtor 2	or non-fi	iling sp	oouse	
	If you have more than one job,	Employment status	■ Employed			I	□ Emplo	oyed			
	attach a separate page with information about additional employers.	Employment status	☐ Not employed				□ Not e	mployed			
		Occupation	Dispatcher								
	Include part-time, seasonal, or self-employed work.	Employer's name	LaSalle Staffing, Inc								
	Occupation may include student or homemaker, if it applies.	Employer's address	200 N. LaSalle Su Chicago, IL 6060		00						
		How long employed to	here? 2 months	s			_				_
Pai	t 2: Give Details About Mor	nthly Income									
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to rep	oort for	any	line, write S	\$0 in the	space. In	clude y	our non-fili	ng
	ou or your non-filing spouse have mo		ombine the information	for all e	emplo	oyers for th	nat perso	n on the li	nes be	low. If you	need
						For Debt	or 1	For De			
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	1,6	311.46	\$		N/A	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$		N/A	

Calculate gross Income. Add line 2 + line 3.

\$ 1,611.46

N/A

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Deb	tor 1	Marcqueisha T. White	_	(Case	number (if kr	own)				
					Fo	r Debtor 1		For	Debtor	2 or	
	Con	w line 4 hore	4.		Φ.	4 644	46	non \$	-filing s	•	
	Cop	y line 4 here	4.		Φ_	1,611	.40	Φ		N/A	<u> </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	۱.	\$_	410	.95	\$		N/A	<u> </u>
	5b.	Mandatory contributions for retirement plans	5b).	\$_	C	0.00	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c	:.	\$_		0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d		\$_		0.00	\$		N/A	_
	5e.	Insurance	5e		\$_		.00	\$		N/A	_
	5f.	Domestic support obligations	5f.		\$_		0.00	\$_		N/A	
	5g. 5h.	Union dues Other deductions. Specify:	5g		\$_ \$		0.00	* + \$		N/A N/A	_
			_ 511	1.+	. –			· : —			_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$ _		.95	\$		N/A	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$ __	1,135	5.51	\$		N/A	<u>\</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a	1.	\$	ſ	0.00	\$		N/A	
	8b.	Interest and dividends	8b		\$		0.00	\$_		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c	; <u>.</u>	\$		0.00	\$		N/A	
	8d.	Unemployment compensation	8d	l.	\$_	C	0.00	\$		N/A	<u> </u>
	8e.	Social Security	8e) .	\$_	C	0.00	\$		N/A	<u> </u>
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	8f.		\$_ \$		0.00	\$		N/A	
	8g. 8h.	Other monthly income. Specify:	8g 8h		\$ \$		0.00	· -		N/A N/A	_
	OII.	Other monthly income. Specify.	_ 011	I.T	Ψ_		.00	ΤΨ_		IN/A	<u></u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	:	\$_	C	0.00	\$		N/	A
10	Cald	culate monthly income. Add line 7 + line 9.	10.	\$		1,135.51	- S		N/A	= \$	1,135.51
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ-		1,100.01	. _		-14/	_	1,100.01
11.	Stat Inclu	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a	depe						Schedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	1,135.51
13.	Dov	ou expect an increase or decrease within the year after you file this form	?						,	Combi month	ned ly income
		No.	-								
	\Box	Yes Explain:									

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Filli	in this information to identify your case:		I		
Debt	otor 1 Marcqueisha T. White		Che	ck if this is:	
	otor 2 ouse, if filing)			An amended filing A supplement show 13 expenses as of	ving postpetition chapter
` '	, 3,	NOIS		MM / DD / YYYY	
	ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLIN	NOIS		IVIIVI / DD / Y Y Y Y	
	se numbernown)				
	fficial Form 106J				
	chedule J: Your Expenses				12/1
info	as complete and accurate as possible. If two married people a ormation. If more space is needed, attach another sheet to this mber (if known). Answer every question.				
Part	t 1: Describe Your Household Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expense</i> .	s for Separate House	ehold of Deb	tor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				□ Yes □ No
				_	☐ Yes
					□ No
					☐ Yes ☐ No
					☐ Yes
3.	Do your expenses include ■ No				_ 1.00
	expenses of people other than yourself and your dependents?				
Esti exp	t 2: Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless yourness as of a date after the bankruptcy is filed. If this is a supplicable date.				
the	lude expenses paid for with non-cash government assistance value of such assistance and have included it on <i>Schedule I:</i> ficial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. payments and any rent for the ground or lot.	Include first mortgag	e 4. \$	S	600.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	8	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$	·	0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		0.00
E	4d. Homeowner's association or condominium dues	and a south of a sour	4d. 9		0.00
5.	Additional mortgage payments for your residence, such as he	ome equity loans	5. 9	D	0.00

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Deptor 1	warcque	eisha I. White	Case num	iber (if known)	
6. Uti	lities:				
6. 6 1.		heat, natural gas	6a.	\$	0.00
6b.		wer, garbage collection	6b.		0.00
6c.	-	e, cell phone, Internet, satellite, and cable services	6c.		250.00
6d.	•		6d.	·	0.00
		ekeeping supplies		· —	200.00
		children's education costs	8.	·	0.00
_		ry, and dry cleaning		\$	150.00
	_	oroducts and services	10.		200.00
	•	ntal expenses	11.		
		•	11.	Φ	50.00
	not include ca	Include gas, maintenance, bus or train fare.	12.	\$	300.00
		ar payments. clubs, recreation, newspapers, magazines, and book		·	0.00
		ributions and religious donations	14.	· -	0.00
	urance.	ributions and religious donations	14.	Ψ	0.00
		surance deducted from your pay or included in lines 4 or	20		
	a. Life insura		15a.	\$	0.00
	. Health ins		15b.		62.00
	c. Vehicle ins		15c.	·	147.00
		rance. Specify:	15d.	·	0.00
		iclude taxes deducted from your pay or included in lines		Ψ	0.00
	ecify:	icidde taxes deducted from your pay or included in lines	+ 01 20. 16.	\$	0.00
		ease payments:		<u> </u>	0.00
		ents for Vehicle 1	17a.	\$	0.00
		ents for Vehicle 2	17b.	· .	0.00
	c. Other. Spe		17c.	·	0.00
	d. Other Spe		17c. 17d.	·	
		·		Φ	0.00
		of alimony, maintenance, and support that you did n your pay on line 5, Schedule I, Your Income (Official		\$	0.00
		s you make to support others who do not live with yo	01111 1001 <i>j</i> .	\$	0.00
	ecify:	, ,	19.		0.00
	,	erty expenses not included in lines 4 or 5 of this form		our Income	
		s on other property	20a.		0.00
	o. Real estat		20b.		0.00
		homeowner's, or renter's insurance	20c.		0.00
		nce, repair, and upkeep expenses	20d.	·	0.00
		er's association or condominium dues	20d. 20e.	·	0.00
				·	
1. Oth	ner: Specify:	Pet Care		+\$	75.00
2. Ca l	culate your	monthly expenses			
	a. Add lines 4	• •		\$	2,034.00
22t	. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Fo	orm 106J-2	\$	_,
		a and 22b. The result is your monthly expenses.		\$	2,034.00
220		a and 110 foods to your monthly expended.			2,034.00
3. Ca l	lculate your i	monthly net income.			
238	a. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	1,135.51
23b	. Copy your	monthly expenses from line 22c above.	23b.	-\$	2,034.00
					,
230		our monthly expenses from your monthly income.			000 40
	The result	is your monthly net income.	23c.	\$	-898.49
		an increase or decrease in your expenses within the			
		ou expect to finish paying for your car loan within the year or do y terms of your mortgage?	ou expect your mortgage	payment to inc	rease or decrease because of
_		terms or your mortgage:			
	No.				
	Yes	Explain here:			

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					•
Fill in this infor	rmation to identify you	ır case:			
Debtor 1	Marcqueisha T.	White			
	First Name	Middle Name	Last Name	_	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	NORTHERN DISTRICT O	FILLINOIS		
Case number (if known)					☐ Check if this is an amended filing
Official For		an Individual I	Debtor's S	chedules	12/15
If two married p	eople are filing togeth	er, both are equally respons	sible for supplying co	orrect information.	
obtaining mone		in connection with a bankru			tement, concealing property, or 00, or imprisonment for up to 20
Sig	gn Below				
Did you pa	ay or agree to pay son	neone who is NOT an attorne	ey to help you fill out	bankruptcy forms?	
■ No					
☐ Yes.	Name of person				nkruptcy Petition Preparer's Notice, n, and Signature (Official Form 119)
that they a	re true and correct.	e that I have read the summ	x		ion and
	queisha T. White ure of Debtor 1		Signature of	of Debtor 2	

Date

Date **September 7, 2017**

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HII.	in this inform	nation to identify you	r casa:				
De	btor 1	Marcqueisha T. First Name	Middle Name	Last Name			
	btor 2 buse if, filing)	First Name	Middle Name	Last Name			
Uni	ited States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF ILLINOIS			
	se number				_	Check if this is an amended filing	
Sta Be a info	as complete a	of Financial	attach a separate sheet to	are filing together, both are	ankruptcy equally responsible for sup additional pages, write yo		
	<u> </u>		arital Status and Where You	Lived Before			
1. What is your current marital status?							
	☐ Married ■ Not mar	ried					
2.	During the la	ıst 3 years, have you	lived anywhere other than	where you live now?			
	■ No □ Yes. List	t all of the places you l	ived in the last 3 years. Do no	ot include where you live now	·		
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there	
3. stat					ity property state or territor co, Texas, Washington and V		
	■ No □ Yes. Ma	ke sure you fill out <i>Scl</i>	nedule H: Your Codebtors (O	fficial Form 106H).			
Pa	rt 2 Explain	n the Sources of You	r Income				
4.	Fill in the tota	I amount of income yo	nployment or from operatin u received from all jobs and a have income that you receiv	all businesses, including part-		ndar years?	
	□ No ■ Yes. Fill	in the details.					
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$5,067.00	☐ Wages, commissions, bonuses, tips		
			☐ Operating a business		☐ Operating a business		

Official Form 107

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Case number (if known) Debtor 1 Marcqueisha T. White

				Debtor 1	1			Debtor 2			
					s of income Il that apply.	(before	s income re deductions and sions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)	
	last calen nuary 1 to	dar year: December	31, 2016)	■ Wage	es, commissions, , tips		\$58,270.00	☐ Wages, combonuses, tips	☐ Wages, commissions, bonuses, tips		
				☐ Opera	ating a business			☐ Operating a	business		
5.	Include include and other	come regard public bene	dless of wheth fit payments;	er that inc pensions;	rental income; inte	amples o rest; divid	f <i>other income</i> are dends; money colle	alimony; child supp	royalties; and	ecurity, unemployment, d gambling and lottery	
	List each	source and	the gross inco	me from e	each source separa	itely. Do i	not include income	that you listed in lin	ıe 4.		
	■ No □ Yes.	Fill in the de	etails.								
				Debtor 1 Sources Describe	of income	each (befor	s income from source re deductions and sions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)	
Pa	t 3: List	Cortain Pa	yments Vou	Made Ref	ore You Filed for		,				
	□ No. ■ Yes.	During the No. Yes	90 days before Go to line 7 List below to adjustment or Debtor 2 or 90 days before Go to line 7 List below to include to adjustment or Debtor 2 or 90 days before Go to line 7 List below to include pay	personal, are you file each credit editor. Do payments ton 4/01/1 r both have are you file each credit ments for	family, or household for bankruptcy, do not to whom you panot include payment to an attorney for to an attorney for to an avery 3 years of the payment of th	id you pa id a total nts for do this bankr rs after th umer det id you pa	y any creditor a tot of \$6,425* or more mestic support obl ruptcy case. at for cases filed o ots. y any creditor a tot of \$600 or more ar	al of \$6,425* or mo in one or more pay igations, such as ch n or after the date o tal of \$600 or more?	re? ments and th ild support ar f adjustment.	nd alimony. Also, do	
	Creditor'	s Name an	d Address		Dates of payme	ent	Total amount paid	Amount you still owe	Was this p	ayment for	
7.	Insiders in of which y a business alimony.	clude your i	elatives; any ficer, director	general pa , person in	artners; relatives of control, or owner of	any general any general	eral partners; partn more of their votir		u are a gener ny managing a	ral partner; corporations agent, including one for	
	■ No □ Yes.	List all payr	nents to an in	sider.							
		Name and			Dates of payme	ent	Total amount	Amount you still owe	Reason for	r this payment	

Case 17-26815 Doc 1 Filed 09/07/17 Entered 09/07/17 14:17:07 Page 45 of 63 Document ase number (if known) Debtor 1 Marcqueisha T. White Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider **Insider's Name and Address Total amount** Amount you Reason for this payment Dates of payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Status of the case Case title Nature of the case Court or agency Case number Midland Funding LLC v. Civil **Circuit Court of Cook** □ Pending Marcqueisha T. White County, 6th D □ On appeal 16 M6 10632 16501 S. Kedzie Parkway, □ Concluded Rm 119 Markham, IL 60428 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No п Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave

Person to Whom You Gave the Gift and

per person

Address:

8.

the gifts

Case 17-26815 Doc 1 Filed 09/07/17 Entered 09/07/17 14:17:07 Page 46 of 63 Document ase number (if known) Debtor 1 Marcqueisha T. White 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Nο Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Description and value of any property Person Who Was Paid Amount of Date payment

Address transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You The Law Offices of Stuart B. June 2017 \$995.00 **Attorney Fees** Handelman, until 200 S. Michigan Avenue, Suite 205 September Chicago, IL 60604 2017 court@sbhpc.net Debthelper.com Counseling August 2017 \$24.00 1325 N. Congress AVE #201

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who

promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16.

No Yes. Fill in the details. Person Who Was Paid

West Palm Beach, FL 33401

Description and value of any property transferred

Date payment or transfer was made

Amount of payment

Address

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Case number (if known) Document

Debtor 1 Marcqueisha T. White

18.	Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers minclude gifts and transfers that you have alread No	ousiness or financial affa ade as security (such as t	i irs? he granting of a se		•		
	Yes. Fill in the details.						
	Person Who Received Transfer Address	Description and v property transferr		Describe any p payments rece paid in exchan	eived or debts	Date transfer was made	
	Person's relationship to you						
9.	Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pressure No		y property to a so	elf-settled trust o	r similar device of	which you are a	
	Yes. Fill in the details.						
	Name of trust	Description and v	alue of the prope		Date Transfer was made		
						made	
Par	t 8: List of Certain Financial Accounts, In	struments, Safe Deposit	Boxes, and Stor	age Units			
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, or	•		•		,	
	houses, pension funds, cooperatives, asso			. шоросы, сыш. с		one, arenerage	
	☐ Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	t or Date ac closed, moved, transfer	or	Last balance before closing or transfer	
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed for	bankruptcy, any	safe deposit box	or other deposito	ory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents		Do you still have it?	
22.	Have you stored property in a storage unit	or place other than your	home within 1 ye	ear before you file	ed for bankruptcy	?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St		escribe the cont	ents	Do you still have it?	
		State and ZIP Code)					
Par	t 9: Identify Property You Hold or Control	for Someone Else					
23.	Do you hold or control any property that so for someone.	meone else owns? Inclu	ide any property	you borrowed fro	om, are storing for	, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		escribe the prop	erty	Value	
Par	t 10: Give Details About Environmental Inf	ormation					
or	the purpose of Part 10, the following definiti	ons apply:					

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 5

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Debtor 1 Marcqueisha T. White

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	haz	ardous material, pollutant, contaminant,	or similar term.		,,	,			
Rep	ort a	II notices, releases, and proceedings the	at you know about, regardless of when	the	y occurred.				
24.	Has	any governmental unit notified you that	t you may be liable or potentially liable	und	ler or in violation of an environme	ental law?			
		No							
		Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	ı	Environmental law, if you know it	Date of notice			
25.	Have you notified any governmental unit of any release of hazardous material?								
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice			
26.	Hav	re you been a party in any judicial or adn	nental law? Include settlements	and orders.					
	■ No □ Yes. Fill in the details.								
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case			
Par	t 11:	Give Details About Your Business or	Connections to Any Business						
				v of	the following connections to any	, husingss?			
21.	*****	Vithin 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
		☐ A member of a limited liability comp							
		☐ A partner in a partnership	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		,				
		☐ An officer, director, or managing ex	ecutive of a corporation						
		☐ An owner of at least 5% of the voting							
		No. None of the above applies. Go to F							
	_	Yes. Check all that apply above and fill		i_					
		siness Name	Describe the nature of the business		Employer Identification numbe				
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper		Do not include Social Security	number or ITIN.			
					Dates business existed				
28.		hin 2 years before you filed for bankrupt itutions, creditors, or other parties.	cy, did you give a financial statement t	o an	yone about your business? Inclu	ude all financial			
		No							
		Yes. Fill in the details below.							
	Name Address (Number, Street, City, State and ZIP Code)								
_	_								

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

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Debtor 1 Marcqueisha T. White

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Marcqueisna 1. White	
Marcqueisha T. White Signature of Debtor 1	Signature of Debtor 2
Date September 7, 2017	Date
Did you attach additional pages to Your Statement of	of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
■ No	
☐ Yes	
Did you pay or agree to pay someone who is not an	attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of Person Attach the Bankruptcy	Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Fill in this inform	nation to identify ye	our caso:		
Debtor 1	Marcqueisha Trirst Name	Γ. White Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for th	e: NORTHERN DIST	RICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official Fo	rm 108			
Statemen	it of Intent	ion for Indiv	iduals Filing Under Chap	oter 7 12/15
			-	
	•	chapter 7, you must fill	out this form if:	
	claims secured by		at armina d	
		ty and the lease has nor rt within 30 days after	ot expired. you file your bankruptcy petition or by the dat	e set for the meeting of creditors.
	ver is earlier, unles		e time for cause. You must also send copies to	
•	ople are filing toge d date the form.	ther in a joint case, bo	th are equally responsible for supplying correc	ct information. Both debtors must
		ssible. If more space is number (if known).	needed, attach a separate sheet to this form.	On the top of any additional pages,
Dowlds Liet Va	Can ditana 18/15 a l	Java Caarmad Claims		
Part 1: List Yo	our Creditors who i	Have Secured Claims		
•	•	n Part 1 of Schedule D	: Creditors Who Have Claims Secured by Prop	erty (Official Form 106D), fill in the
information be Identify the cre	iow. editor and the prope	rty that is collateral	What do you intend to do with the property	that Did you claim the property
			secures a debt?	as exempt on Schedule C?
	ogers & Hollands	3	☐ Surrender the property.	□ No
name:			Retain the property and redeem it.	Yes
Description of			Retain the property and enter into a Reaffirmation Agreement.	_ 103
property	Location: 3728 Flossmoor IL 6	Cherry Hills Dr.,	☐ Retain the property and [explain]:	
securing debt:	I lossillooi iL o	0422		
Part 2: List Yo	our Unexpired Pers	onal Property Leases		
For any unexpire	d personal propert	y lease that you listed	in Schedule G: Executory Contracts and Unex	
			expired leases are leases that are still in effect he trustee does not assume it. 11 U.S.C. § 365	
Describe your u	nexpired personal	property leases		Will the lease be assumed?
Lessor's name:				□ No
Description of lea	sed			
Property:				☐ Yes
Lessor's name:				□ No
Description of lea	sed			
Property:				☐ Yes
Lessor's name:				□ No
				

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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Deb	otor 1	Marcqueisha T. White	Case number (if known)	
		n of leased		
Property:] Yes
Lessor's name: Description of leased Property:				l No
] Yes
Lessor's name: Description of leased Property:] No
		. 6. 164666] Yes
Lessor's name:] No
Description of leased Property:] Yes
Lessor's name:] No
Description of leased Property:] Yes
Par	t 3:	Sign Below		
		alty of perjury, I declare that I have indica nat is subject to an unexpired lease.	ted my intention about any property of my estate that secur	res a debt and any personal
Ī	/s/ M	arcqueisha T. White	X	
		cqueisha T. White ture of Debtor 1	Signature of Debtor 2	
	Date	September 7, 2017	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-26815 Doc 1 Filed 09/07/17 Entered 09/07/17 14:17:07 Desc Main Document Page 56 of 63

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Marcqueisha T. White		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPENSA	TION OF ATTORN	NEY FOR DE	CBTOR(S)	
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for service be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:				to me, for services rendered or to	
	For legal services, I have agreed to accept		\$	995.00	
	Prior to the filing of this statement I have received		\$	995.00	
	Balance Due		\$	0.00	
2.	\$_335.00 of the filing fee has been paid.				
3.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
4.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
5.	■ I have not agreed to share the above-disclosed compensation	on with any other person un	less they are meml	pers and associates of my law firm.	
	☐ I have agreed to share the above-disclosed compensation w copy of the agreement, together with a list of the names of				
6.	In return for the above-disclosed fee, I have agreed to render le	egal service for all aspects of	f the bankruptcy c	ase, including:	
	 a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. [Other provisions as needed] 				
7.	7. By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtor(s) in any dischargeability actions, judicial liens, or any other adversary proceeding. Anticipated fee of \$425.00 for possible redemption motions.				
	CE	RTIFICATION			
	I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.				
September 7, 2017 /s/ Stuart B. Handelman					
1	Date		Stuart B. Handelman		
		Signature of Attorney The Law Offices of	Stuart B. Hande	elman, P.C.	
		200 S. Michigan Av Chicago, IL 60604	enue, Suite 205		
		(312) 360-0500 Fax	: (312) 360-1033	.	
		Court@sbhpc.net Name of law firm	-		
		Name of law firm			

THE LAW OFFICES OF STUART B. HANDELMAN

A Professional Corporation

Will

WWW.CHICAGOLANDBANKRUPTCY.COM

Stuart B. Handelman Jean M. Huang Kelly Smith 200 S. Michigan Avenue, Suite 205 Chicago, Illinois 60604-4398 Telephone (312) 360-0500 Fax (312) 360-1033

ADVANCE PAYMENT RETAINER FOR CHAPTER 7 BANKRUPTCY

I, (the Debtor, whether one or more parties), hereby retain The Law Offices of Stuart B. Handelman, P.C. ("The Attorney") to represent me in a Chapter 7 bankruptcy. I hereby give permission to The Firm to hire co-counsel, or independent contractors in my Chapter 7 bankruptcy. Debtor acknowledges receiving a copy of this contract.

The parties agree as follows:

1. Type of Bankruptcy.

Debtor retains Attorney to file a Chapter 7 bankruptcy case. If the Debtor determines at a later date that the Debtor desires to file a Chapter 13 bankruptcy case, the parties shall execute a new fee contract setting forth the terms of such representation.

2. Base Attorney Fees.

The base attorney fee for filing the Chapter 7 bankruptcy case is \$995.00. Debtor agrees to pay the base attorney fee by the agreed date of September 1, 2017. In the event the base attorney fee is not paid in full by agreed date, the base fee will increase \$200.00 per month. ALL RETURNED CHECKS ARE SUBJECT TO A \$25.00 PROCESSING FEE.

The base fee is based on the following assumptions:

- (a) The Debtor has provided the Attorney with complete and accurate information.
- (b) The Debtor's circumstances, particularly the Debtor's Current Monthly Income as defined by the Bankruptcy Code, does not change prior to the actual filing of the Chapter 7 Bankruptcy case.
- (c) The Debtor must pay the fee prior to the filing of the case. Debtor understands that no bankruptcy protection is in effect until the case is filed with the court.

If any of these assumptions prove to be inaccurate, and as a result the amount of legal services provided by the Attorney is increased, then the base attorney fee shall be increased accordingly and to compensate the Attorney for the additional time and services in providing the legal services. At such time, the parties must execute a supplement to this Agreement. If the Debtor refuses to sign such a supplement, then the Attorney-Debtor relationship shall be terminated and no Chapter 7 bankruptcy Case will be filed for Debtor by the Attorney.

Because of the extent and urgent nature of the work that we will be doing for you, we require a retainer, which is an Advance Payment Retainer ("APR"). This means that once received, the funds paid by you, will become the property of Firm and will not be deposited and held in a client trust account. Instead, the funds will be deposited in the Firm's general account and applied to the work we perform on your behalf. With other firms you may have the option of using a security retainer instead of an APR. Our firm is unwilling to undertake the

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engagement unless an APR is agreed to. By using an APR, funds paid to our firm will not be subject to attachment from your creditors.

3. Refund of Percentage of Base Fee.

In the event the legal services provided for herein are terminated by either party prior to the filing of a Chapter 7 bankruptcy case, then the Debtor may be entitled to a refund of some of the base fee. The refund shall be determined by the number of hours devoted by Attorney to the case prior to the time of termination computed at the rate of \$350.00 per hour; by the time devoted to the case by the Legal Assistants of Attorney computed at the rate of \$100.00 per hour; by adding all expenses incurred (such as copies, postage, securing records and documents, tax transcripts, credit reports, etc); and then by deducting the total amount of all charges from the Base Fee. If in the event the total of all such fees and charges exceed the Base Fee, the Debtor's liability shall be limited to the amount of the Base Fee.

4. Debtor's Obligations to Pay Designated Costs.

The Debtor shall be obligated to pay the following costs related to the filing of a Chapter 7 bankruptcy case. The costs are as follows:

- The fee of \$335.00 charged by the Bankruptcy Court to file a Chapter 7 bankruptcy case. (a)
- The cost of pre-filing consumer credit counseling, which is a prerequisite to filing for bankruptcy (b) relief, which is approximately \$50.00 for an individual and no more than \$75.00 for a husband and wife.
- The cost of a post-filing instructional course concerning personal financial management, which is a (c) prerequisite to obtaining the Discharge of debts in a Chapter 7 case. The amount of this fee is not known at this time but should be consistent with the pre-filing credit counseling fees.
- (d) The cost of obtaining any consumer credit reports.
- The cost of obtaining tax returns or tax transcripts directly from the taxing authorities or from any (e) third-party provider.
- The cost of obtaining copies of judgments, deeds, deeds of trust, title certificates, court papers, (f) county tax records, and other similar documents.
- The cost of securing any prior court records from the PACER system for federal cases. (g)
- The cost of securing any other records or statements not otherwise produced by or available to the (h) Debtor.
- Additionally, Debtor agrees to be prompt and attend all scheduled office consultations, including the (i) appointment to sign the petition. Debtor understands that a fee of \$200.00 will be assessed if Debtor fails to appear or cancels an appointment within 1 business day of the scheduled meeting.

5. Services provided Under the Attorney's Base Fee.

The services of the attorney included in the base fee are those normally contemplated for a Chapter 7 case. They include the services listed below:

- All services reasonably necessary to fully inform the Debtor of the Debtor's rights and (a) responsibilities under the Bankruptcy Laws.
- All services reasonably necessary to enable the Debtor to make an informed decision about the filing (b) of a Chapter 7 bankruptcy case.
- Advising the Debtor of all available exemptions under any applicable law and assisting the Debtor in (c) claiming the exemptions that best serve the Debtor's needs and desires.
- Assisting the Debtor in complying with all of the requirements imposed by the Bankruptcy Laws, the (d) Bankruptcy Rules, or any Local Bankruptcy Rules.

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- (e) Preparation and electronic filing of petition, schedules, supplemental local forms, and mailing matrix.
- (f) Drafting and mailing notice to creditors advising of filing of case.
- (g) Drafting and mailing to you a letter regarding your attendance at the Section 341 meeting of creditors and your other responsibilities.
- (h) Preparation for and attendance at Section 341 meeting, either by an employee or an independent contractor.
- (i) Filing of any motions to avoid non-purchase money liens on exempt household goods and judgment liens that impair exempt property.
- (j) Assisting the Debtor in carrying out the Debtor's Statement of Intentions, provided that the Debtor pays the Non-Base Fee for any redemption.
- (k) Assisting the Debtor in complying with all proper and timely requests for information and/or documents by the Bankruptcy Trustee, the Bankruptcy Administrator, the Court, or other parties involved in the case.
- (1) Communicating as necessary with the creditors and other parties involved in the case (including their attorneys) to facilitate the administration of the case and the application of the Automatic Stay.
- 6. The Law Firm will not represent the Client(s) in any reaffirmation hearings where attorney believes the filing of such agreement constitutes an undue hardship and is not in the best interests of the Client(s). A reaffirmation agreement is a legally valid contract that if the Client(s) defaults post-discharge he/she could lose the collateral that is the subject of the agreement. A debt that is reaffirmed is not discharged in your bankruptcy case. The Client(s) has 60 days after an agreement is filed with the Court to rescind said agreement. If the Client(s) desires to reaffirm a debt, the Client(s) must file a proper motion with the Court. The Client(s) may do this without an attorney. If the Client(s) does not have a separate attorney to sign the certification, then the Client must get the Court to approve the agreement.

THE LAW FIRM WILL NOT CERTIFY ANY REAFFIRMATION AGREEMENTS WHERE THE BANKRUPTCY SCHEDULES SHOW THAT THE CLIENT(S) = MONTHLY INCOME IS LESS THAN THE CLIENT(S) = MONTHLY EXPENSES, REGARDLESS OF ANY OTHER CIRCUMSTANCES.

7. Compensation for Non-Base Legal Services.

For such non-base services, you may be charged without any further notice and in the discretion of the Court non-base fees for the following services and in the amounts noted:

(a)	Amendments to Schedules & Court Fee	\$126.00
(b)	Motion to continue the 341 meeting	\$350.00
(c)	Defending a motion for relief from stay	\$450.00
(d)	Motion for Redemption	\$350.00
(e)	Motion to continue the Automatic Stay	\$450.00
(f)	Motion to Avoid a Lien or Judgment	\$495.00

- (g) With respect to all other mattes, other than the contingent fee cases described below, the Attorney will keep time and expense records for any non-base service and apply to the Court for the approval of the fee plus all expenses incurred. The current hourly fee for your Attorney is \$355.00 and the current hourly fee for his Legal Assistant is \$125.00.
- (h) The attorney will be entitled to a contingency fee equal to 50% of any actual recovery from any party for a violation of the automatic stay, the discharge injunction, or for breach of any state or federal consumer protection statutes.

8. Expenses.

The Attorney shall be entitled to apply to the Court for approval of any expenses related to your case for base fee or non-base fee services. Such expenses include but are not limited to court fees, telephone fees, fax fees, copy fees, postage fees, PACER fees, electronic or other research fees. In the Court's discretion, the Attorney may request without any notice or documentation a blanket expense of \$1.00 for each item noticed to creditors as an expense for postage, copying and envelopes.

9. Payment of Base and Non-Base Fees.

- (a) The Base Fee shall be paid in full prior to the time the Attorney begins any actual work on the Chapter 7 Petition and Schedules.
- (b) All fixed Non-Base fees must be paid in Advance of the Service by the Debtor.
- Fees for services based on time and expenses shall be paid within 30 days of the Debtor's receipt of the bill for such services; provided, however, that the Attorney may require the payment of a retainer fee for non-base services that are expected to require more than 2 hours of the Attorney's time.
- (d) The Debtor understands that if the Debtor does not pay the non-base fees as provided in this Agreement then the Attorney has no obligation to provide the non-base services and has the right to file a motion to withdraw as the attorney for the debtor in the Chapter 7 case, the contested case, or the adversary proceeding.

10. Means Test Services.

With respect to the "means test" provisions imposed by Section 707(b) of the Bankruptcy Code, the base fee charged in this case is based on one of the four assumptions set forth below. The assumption that applies is designated by the initials of the Debtor placed after the Assumption.

- (a) The Debtor's debts are not primarily consumer debts and therefore the "means test" does not apply. The parties assume that no issues concerning the "means test" will arise in this case.
- (b) The Debtor's current monthly income as defined by the Bankruptcy Code is below the median income. The parties assume that no issues concerning the "means test" will arise in this case.
- (c) The Debtor's current monthly income as defined by the Bankruptcy Code is above the median income but the Debtor's expenses, as calculated under Section 707(b)(2)(A) are sufficient to rebut the presumption that the filing of a Chapter 7 case would be an abuse of the Bankruptcy laws. The parties assume that no issues concerning the "means test" will arise in this case.
- A presumption of Bankruptcy abuse does arise in this case, but the Debtor and the Attorney will attempt to rebut the presumption by demonstrating extraordinary circumstances pursuant to Section 707(b)(2)(B) of the Bankruptcy Code. Attached to this Agreement is an Addendum setting forth an explanation of the Debtor's obligations in demonstrating extraordinary circumstances and the details of the parties' Agreement concerting fees for proceedings related to the establishment of extraordinary circumstances.

11. Debtor's Obligations.

The Debtor's obligations are as follows:

- (a) To promptly pay all Base and Non-Base Legal fees and charges.
- (b) To provide the Attorney with all requested documents, bills statements, payment advices, bank records, tax returns, tax bills, appraisals, retirement and savings account, and income information and to sign any and all necessary forms to allow the Attorney to secure such documentation.

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- (c) To provide accurately and honestly all of the information necessary to prepare and file the Chapter 7 bankruptcy case, and other motions or proceedings arising during the course of the case.
- (d) To timely respond to all letters, emails and telephone calls from the Attorney or any member of his staff.
- (e) To keep the Attorney advised at all times of the Debtor's mailing and physical addresses, telephone numbers, and email addresses.
- (f) To appear at the first meeting of creditors (the 341 meeting) and at any other court hearings or meetings as may be required by the Court or any other party.
- (g) To keep all scheduled office appointments with the Attorney and to notify the Attorney in advance of any problems with the timing and scheduling or rescheduling of such appointments.
- (h) To contact the attorney by Telephone with the understanding that the Attorney is only able to return calls between the hours of 8:00 a.m. to 9:30 a.m. and 4:00 p.m. to 6:00 p.m. If the Attorney is available when the call is actually received, then the call will be taken at that time. However, if you have to leave a message for the Attorney then you must provide a number that you can be reached at during the designated times. The Attorney or Legal Assistant will make every effort to return all such telephone calls within 48 hours, excluding weekends and holidays.
- (i) To provide any information requested of the Debtor by the Chapter 7 Trustee, the Bankruptcy Administrator, or any other party in the case, unless the Court rules that the Debtor is not required to provide such information.
- (i) To respond as soon as possible to any requests for the Debtor by the Attorney or his Legal Assistant.
- (k) To sign a tax authorization form to authorize the Attorney to get copies of income tax returns from the respective taxing agencies for a period of four (4) years prior to the filing of your bankruptcy case.
- (l) To provide current bank account information to include monthly statements as requested and online account balances as of the date of the signing of your bankruptcy petition packet.

12. Electronic Communications

You agree that we may provide you with any communications that we may choose to make available in electronic format, to the extent allowed by law, and that we may discontinue sending paper communication to you, unless and until you withdraw your consent by (a) speaking to an Attorney in the firm, and (b) sending a written notice to the Attorney withdrawing the consent for electronic communication.

Your consent to receive electronic communications and transactions includes, but is not limited to: correspondence regarding the status of your case, termination of our services, court orders, court results, notices, monthly (or other periodic) billing or account statements for your account.

You further agree to immediately notify us of any changes to your email address.

(Initials) (Initials)

13. Attorney Withdrawal from Chapter 7 case, Adversary Proceeding or Contested Matter.

Pursuant to the Local Rules of the Bankruptcy Court, the Attorney shall remain the responsible attorney of record for the Debtor in all matters in the case until the case is closed, dismissed or the discharge is entered or until the Attorney is relieved from such representation by order of the Court. The parties agree that just reasons for the Attorney to withdraw from the representation of the Debtor, include but are not limited to the following:

- (a) The failure of the Debtor to provide complete, truthful and accurate information to the Attorney.
- (b) The failure of the Debtor to comply with the Debtor's obligations as provided for in this Agreement and in the Local Rules.

- (c) The failure of the Debtor to comply with any of the obligations imposed on the Debtor by the Bankruptcy Code and the Bankruptcy Rules.
- (d) The failure or refusal of the Debtor to comply with the Debtor's obligations to provide any supplemental information to the Court or to the Chapter 7 Trustee or to correct any incorrect or incomplete information previously provided to the Court or the Trustee.
- (d) The failure of the Debtor to provide complete, truthful and accurate information to the Court, the Chapter 7 Trustee.
- (e) The failure of the Debtor to pay for all Non-Base fee services.
- (f) If the Debtor are husband and wife, then any separation, serious domestic dispute, or divorce of the parties.
- (g) Any irreconcilable conflict between the Attorney and the Debtor with respect to the case.

14. Non-Discharge of Certain Debts.

I have been told that some debts are not discharged by a Chapter 7 bankruptcy. I understand that some of the debts that are not dischargeable are (1) Certain tax debts and other debts or fines owed to governmental units, including parking tickets (2) Debts incurred by fraudulent means, including but not limited to, recent cash advances and other recent usage, (3) Accidents while driving under the influence of drugs or alcohol, (4) Alimony and child support, (5) judgment liens and liens on property, (6) Intentional torts, and (7) Credit card charges used to pay State or Federal Taxes, (8) Student Loans owed to the government and non-government agencies.

Debtor has been informed, and fully understands, the following restrictions regarding receiving a discharge in another bankruptcy once Debtor receives a discharge in this bankruptcy:

- (a) A chapter 7 Debtor may not be granted a discharge if a discharge was received under chapter 7 in a case filed within eight years of the filing of a chapter 7 petition. (Eight years between chapter 7 discharges).
- (b) A chapter 13 Debtor may not be granted a discharge if he/she received a discharge in a previous chapter 7, 11 or 12 filed within four years of the filing of a chapter 13. (Four years between chapter 7 and then a chapter 13 discharge).

Dated:

June 14, 2011

By:

The Law Offices of Stuart B. Handelman, P.C.

Dated:

June 14, 2017

Monfame Chell

United States Bankruptcy Court Northern District of Illinois

In re	Marcqueisha T. White	Debtor(s)	Case No. Chapter 7			
	VERIFICATION OF CREDITOR MATRIX					
		Number of Cr	reditors:	40		
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of creditors	s is true and correct to	the best of my		
Date:	September 7, 2017	/s/ Marcqueisha T. White Marcqueisha T. White Signature of Debtor				